

IN THE UNITED STATES DISTRICT COURT
FOR THE Western DISTRICT OF TEXAS
El Paso DIVISION

Jonathan Webb # 40177-480
Plaintiff's Name and ID Number

E.C.I. Phoenix - Medium
Place of Confinement

EP21 CV0254

CASE NO. _____
(Clerk will assign the number)

v.

West Texas Detention Facility Lassalle corrections/corp.
A.W. McQuade, 401 South Vaquero Ave. Sierra Blanca, Texas. 79851
Defendant's Name and Address

West Texas Detention Facility Lassalle corrections/corp.
Sr. W. Shep, 401 South Vaquero Ave. Sierra Blanca, Texas. 79851
Defendant's Name and Address

West Texas Detention Facility Lassalle corrections/corp.
Sgt. Franco, 401 South Vaquero Ave. Sierra Blanca, Texas. 79851
Defendant's Name and Address
(DO NOT USE "ET AL.")

INSTRUCTIONS - READ CAREFULLY

NOTICE:

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

FILING FEE AND *IN FORMA PAUPERIS* (IFP)

1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$52.00 for a total fee of **\$402.00**.
2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
3. The Prison Litigation Reform Act of 1995 (PLRA) provides "... if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$52.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

CHANGE OF ADDRESS

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "NOTICE TO THE COURT OF CHANGE OF ADDRESS" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

I. PREVIOUS LAWSUITS:

- A. Have you filed *any* other lawsuit in state or federal court relating to your imprisonment? YES ☒ NO
- B. If your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)
 1. Approximate date of filing lawsuit: N/A
 2. Parties to previous lawsuit:
Plaintiff(s) N/A
Defendant(s) N/A
 3. Court: (If federal, name the district; if state, name the county.) N/A
 4. Cause number: N/A
 5. Name of judge to whom case was assigned: N/A
 6. Disposition: (Was the case dismissed, appealed, still pending?) N/A
 7. Approximate date of disposition: N/A

II. PLACE OF PRESENT CONFINEMENT: F.C.I Phoenix - Medium

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted all steps of the institutional grievance procedure? X YES NO

Attach a copy of your final step of the grievance procedure with the response supplied by the institution.

IV. PARTIES TO THIS SUIT: Attachment letter with attempts to get grievance responses as well as Risk Management and FOIA request to NO Avail. letter to civil right formal complaint sent to DOJ Division Risk Management to Gov. of Texas, Risk Management, LaSalle corrections pages 1 thru 8 1 page 5 1 2 for chronological order of

A. Name and address of plaintiff: Jonathan Webb # 40177-480
F.C.I Phoenix-Medium, 37910 N. 45th AVE.,
Phoenix, AZ. 85086

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: A.W. McQuade, West Texas Detention Facility
LA Salle Corrections/corp, 401 South Vaguerro Ave. Sierra Blanca, Texas.
79851

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

'Sprayed Me in the face with Mace after already detained', Then called Me
"a stupid dumb Nigger."

Defendant #2: Sr. Warden Shup, West Texas Detention Facility La Salle
corrections/corp. 401 South Vaguerro Ave. Sierra Blanca Texas. 79851

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

interviewed when Deputy officer came to allow me to make a complaint on AW.
McQuade for spraying me after detained calling me a stupid dumb Nigger, then told me that the
term Nigger is freedom of speech as far as he was concerned. then he smiled at me.

Defendant #3: Sgt. Franco, West Texas Detention Facility La Salle corrections/corp.,
401 South Vaguerro Ave Sierra Blanca, Texas. 79851

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

He escorted Me to Sal port patted Me Down placed cuffs on me Then turned
Me towards A.W. McQuade Toward he assaulted Me in the face with Mace, and was
Badgering Me while escorting Me to the Shu. stating what he'll do to Me!

Defendant #4: _____

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Defendant #5: _____

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.

On or about Oct. 11, 2019, The Excessive Force took place in Salipart to where cameras and Inmate witnesses were able to see. I was escorted at the pool told to place hands against wall, Sgt. Franco patted me down placed cuffs on me. Then he turned me towards A.W. McQuade and he then sprayed me directly in the face with a Big Can of Mace. Then was taken to the SHU for 30 days LA Salle Corrections Corp. also reprimanded A.W. McQuade for his actions. This could have been handled differently without excessive force when I was already detained. They are Trained officers, I was already in cuffs there for I should have never been assaulted in the face by the spraying of Mace by A.W. McQuade. I complied with orders and was already detained. This is cruel & unusual punishment. (See Attachment A claim 2 related to same incident)

VI. RELIEF:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes. (See Attachment A2 related to same incident)

I ask that the Maximum allowable judgement and penalties be awarded. My Civil Right and Constitutional Rights were Violated, The officers and institution has an obligation that they purposely and willfully neglected I request 3.6 Million dollars, 3,600,000.00

VII. GENERAL BACKGROUND INFORMATION:

A. State, in complete form, all names you have ever used or been known by including any and all aliases.

Jonathan Webb, Keith Webb

B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.

Marshal #3, Federal Reg # 40177-480

VIII. SANCTIONS:

A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES X NO

B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (if federal, give the district and division): N/A

2. Case number: N/A

3. Approximate date sanctions were imposed: N/A

4. Have the sanctions been lifted or otherwise satisfied? N/A YES NO

Claim 2 (A.) Attachment.
related to same
incident

Claim 2: Retaliation / Racial comments - Slanderment;

On or about Oct. 11, 2019 after being assaulted in the face with a Big Can of Mace by A.W. McQuade, while being escorted to the "Sho" an officer asked what happened? A.W. McQuade then stated "Just Another Stupid Dumb Nigger!" I also wrote a formal complaint affidavit with other detainees signatures on it and Notarized. Mr. Hunter can concur that A.W. McQuade didn't handle the situation correctly or by policy. He is an officer that was present at the time all this took place at LA SALLE corrections/corp. I was then targeted after this, so I wrote Hudspeth County Sheriff Office, 525 Brown St. Sierra Blanca, Texas 79851. When the Deputy officer came to allow me to make a complaint/file charges on A.W. McQuade, Sr. Warden Shep intervened and denied me that right to make such complaint and he then stated "the Term Nigger is a freedom of speech term as far as he was concerned then smiled at me". I was mentally distraught behind this? stayed away from the Police etc. (people with high ranking staff titles) LA SALLE Corp. reprimanded A.W. McQuade. It was investigated Allegedly by Elyette ^{Castro} ~~Castro~~ a Marshal she told me the Cameras/video, statements/affidavits & letters I wrote to the ACLU, Hudspeth County, Ruston LA/Head Courters for LA SALLE corrections/corp. The executive Director Rodney Cooper was sent to the El Paso Division Department. This ~~Retaliation~~ Retaliation/Racial Comments? Slanderment was uncalled for!

Relief (A2) Attachment
related to same
incident
for claim 2

RELIEF: I ask that the maximum allowable Judgment and penalties be awarded, My Civil Right and Constitutional Rights were violated. The officers and institution has an obligation that they purposely and will fully Neglected. I ask for 1.4 million dollars, 1,400,000.00

C. Has any court ever warned or notified you that sanctions could be imposed? _____ YES X NO

D. If your answer is "yes," give the following information for every lawsuit in which a warning was issued. (If more than one, use another piece of paper and answer the same questions.)

1. Court that issued warning (if federal, give the district and division): N/A
2. Case number: N/A
3. Approximate date warning was issued: N/A

Executed on: OCT. 05. 2021
DATE

Jonathan Webb # 40177-480
[Signature]
(Signature of Plaintiff)

PLAINTIFF'S DECLARATIONS

1. I declare under penalty of perjury all facts presented in this complaint and attachments thereto are true and correct.
2. I understand, if I am released or transferred, it is my responsibility to keep the court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
3. I understand I must exhaust all available administrative remedies prior to filing this lawsuit.
4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions or appeals (from a judgment in a civil action) in a court of the United States while incarcerated or detained in any facility, which lawsuits were dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger of serious physical injury.
5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire filing fee and costs assessed by the court, which shall be deducted in accordance with the law from my inmate trust account by my custodian until the filing fee is paid.

Signed this (05) day of October, 20 21.
(Day) (month) (year)

Jonathan Webb # 40177-480
[Signature]
(Signature of Plaintiff)

WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.

To U.S. District Court, Clerk

My Civil Right and Constitutional Rights
were violated.

I was in Federal custody being held
by the Marshal's at West Texas Detention
Facility LA Salle corrections/corp., located
at 401 South Vaquero AVE Sierra Blanca,
Texas. 79851.

I request that this Civil Rights Complaint be
Filed through IN Forma Pauperis (I.F.P) in
the correct Court, I believe it can be filed
in both State as well as Federal due
to me be placed in the facility as a Federal
Detainee at LA SALLE corrections/corp.
awaiting to be sent to where I am residing
now FCI Phoenix-Medium 37910 N. 45th
AVE, Phoenix, AZ 85006.

I also know that where West Texas Detention
Facility is located at there is a 205th District
Court #1002 at 500 E. San Antonio, El Paso TX. 79901
So I've sent one there too, I ask that you allow
me to file this 1983 prisoners civil Right's Complaint
in IN Forma Pauperis in the proper Court Room
due to me being a Federal Detainee/Inmate being
held by the Marshal's at a privately owned

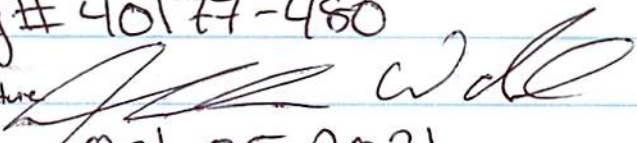
facility such as West Texas Detention Facility
LA Salle corrections/corp. who's executive
Director is Rodney Cooper. When my Civil
Right and Constitutional Rights were Violated.

Please handle the proper filing and if
I am in the wrong place forward it to
the correct for me including permission
to file in IN Forma pauperis.

I thank you well in advance for your
time, consideration as well as prompt assistance
in this very important matter. God Bless

Sincerely,

print Jonathan Webb
Marshal, Federal Reg # 40177-480

Signature 
Date Oct. 05, 2021

Return address: FCI Phoenix-Medium, 37910 N.
45th Ave, Phoenix AZ - 85086, IF response
for some type of error or correction that needs
to be made and it's past my Release Date of
Oct. 28, 2021 please forward My response
to My home address 3510 Keltner, Apt 2
El Paso, Texas. 79930

Sent via Legal July 19, 2021

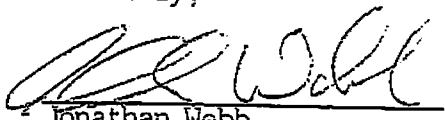
FREEDOM OF INFORMATION ACT REQUEST

Hudspeth County Sheriff's Office
F.O.I.A. / Privacy Act Section/Department
525 Brown Street
Sierra Blanca, TX 79851
Mail to: Jonathan Webb
Reg. #40177-480
Federal Correctional Institution
F.C.I. Phoenix, Medium
37910 N. 45th Ave.
Phoenix, AZ 85086

My name is Jonathan Webb. I was born 4/29/1985. I am currently living in Phoenix, AZ. I am a Citizen of this country. This letter is a F.O.I.A. request. The documents sought are:

1. Any and All Documents, Letters to the Sheriff's Department pertaining to Filing a complaint against A.W. McQuade. All Documents received and sent from Hudspeth Sheriff's department regarding me, Jonathan Webb from Nov. 2019 to Jan. 2020. Please send to the address above.

Sincerely,


Jonathan Webb
#40177-480

FREEDOM OF INFORMATION ACT REQUEST

Sent w/ I.D. to the Lasalle

✓

July 7, 2021

Federal Bureau of Prisons - Central Office

F.O.I.A. / Privacy Act Section

320 1st Street N.W.

Washington, DC 20534

Federal Correction Institution

F.C.I. Phoenix, Medium

37910 N. 45th Ave.

Phoenix, AZ 85086

My name is Jonathan Webb. I was born 4/29/1985. I am currently living in Phoenix, AZ.

I am a Citizen of this country. This letter is a F.O.I.A. request. The documents sought are:

1. A complete copy of my central file to include but not limited too; all notarized Affidavits / Complaints, Transfer, grievances, emails, documents, notes, investigations & the investigation Fyette Castro the Marshal who sent all video & Audio and investigation on excessive force to the El Paso, TX Marshal department all shu reviews & reprimands on A.W. Noquade and or any officers as well as any other documents in references to me and my incarceration a West Tx detention facility LaSalle Corrections located at 401 South Vequero Ave. Seirra Blanca, Tx 79651

Sincerely,



Jonathan Webb

#40177-480

CIVIL RIGHTS FORMAL COMPLAINT:

Sent out on July 16, 2021 Legal Mail
 To DOJ Civil Rights Division
 601 D St, NW
 Washington, DC 20537

Please consider this as a Formal Complaint written to the Department of Justice Civil Rights Division. I am requesting this complaint to be filed and that I receive a Reference Number. The following violations of My Civil Rights that occurred.

Facts of Claims:

Claim 1 - On or About October 11, 2019, The Excessive Force took place in Sali Port where cameras and inmate witnesses were able to see. I was escorted out of the pod, told to place my hands against the wall, they pat me down and Sgt. Franco placed cuffs on me. Then I turned around towards A.W. Mcquade and he sprayed me in the face with a Big Can of Mace. Then I was taken to the "Shu" for 30 days. Mr. Hunter, who is an officer will concur that A.W. Mcquade didn't handle the situation correctly and or by policy. La Salle Corporation also reprimanded A.W. Mcquade. This could have been handled differently without excessive force when I was already detained. They are trained officers and I was already in cuffs therefore I should have never been assaulted in the face by the spraying of Mace especially because I was already detained. This is Cruel and Unusual Punishment.

I am to be compensated in the amount of Three Million Dollars (\$3,000,000.00) to Three Point Six Million Dollars (\$3,600,000.00). The reason for the range is because of Mental (Counseling for Mental State), Medical (to include medication).

The Expected Time to Respond is 60 Days.

Claim 2 - On or about October 11, 2019 after being assaulted in the face with Big Can of Mace, while being escorted to the "Shu" an Officer asked What Happened? A.W. Mcquade stated: "Just another stupid dumb Nigger". I also wrote a formal complaint affidavits with other detainee's signatures on it and got it notarized. I have one witness, Mr. Hunter that can concur that A.W. Mcquade didn't handle the situation correctly and or by policy. I was targeted after that I wrote Hudspeth County, Seirra Blanca, Tx. When Deputy Officer came from Hudspeth, County Police Department to allow me to make a complaint, Head Warden Shep intervened, and told me that the Term Nigger is a Freedom of Speech Term. This really messed me up mentally where I stayed away from the police, etc. (People with high ranking staff titles) La Salle Corporation reprimanded A.W. Mcquade. It was investigated allegedly by Evette Castro (She is a Marshal) she told me the cameras / video, statements / affidavits & letters I wrote to ACLU, hudspeth county, Ruston, LA / Headquarters for LaSalle Corporation. This Retaliation is uncalled for. I am now placing The Department of Justice on NOTICE (1st Notice to DOJ - Second Notice to F.B.O.P.) Preserve any and all video and audio of the Sali Port of R3, October 10 and 11, 2019 at West Texas Dentention Facility LaSalle Corrections.

I am asking to be compensated One Point Four Million Dollars, ~~(\$1,400,000.00) for Racial Comments made and Retaliation.~~

The Expected Time to Respond is 60 Days.

Sincerely,


 Jonathan Webb

RISK MANAGEMENT
FORMAL COMPLAINT

This is a formal complaint to the State of Texas Risk Management Department. I am Jonathan Webb located at Federal Correctional Institution Phoenix, AZ 85086. My Registration Number is #40177-408.

Facts:

1. On or About October 11, 2019. The Excessive Force took place in Sali Port where cameras and inmate witnesses were able to see. I was escorted out of the pod, told to place my hands against the wall, they pat me down & Sgt. Franco placed cuffs on me. Then I turned around towards A.W. McQuade and he sprayed me in the face with a Big Can of Mace. Then I was taken to the "Shu" for 30 Days. Mr. Hunter, who is a officer will concur that A.W. McQuade didn't handle the situation correctly and or by policy. La Salle Corporation also reprimanded A.W. McQuade. This could have been handled differently without excessive force when I was already detained. They are trained officers and I was already in cuffs therefore I should have never been assaulted in the face by the spraying of Mace especially because I was already detained.

I am to be compensated in the amount of Seven-Hundred Fifty Thousand Dollars (\$750,000.00) to One Point Two Million Dollars (1,200,000.00). The reason for the range is because of Mental (Counseling for Mental State), Medical (to include medication).

The Expected Time to Respond is 60 Days.

Respectfully Submitted,


Jonathan Webb

IN THE UNITED STATES OF AMERICA

IN THE STATE OF ARIZONA

DECLARATION/AFFIDAVIT

IN THE COUNTY OF MARICOPA

UNDER THE PENALTY OF PERJURY

I, Jonathan Webb, BEING THE NARRATOR OF THE FACTS PRESENTED IN THIS STATEMENT, ARE TRUE TO THE BEST OF MY KNOWLEDGE, OF THE EVENT(S) THAT I WITNESSED AT SAID TIME. BEING AVAILABLE TO TESTIFY IF CALLED TO DO SO, OF THE FACTS THEREIN. I HEREBY DECLARE:

1. I am over the age of Eighteen.
2. I am a United States Citizen.
3. On or About October 11, 2019. The Excessive Force took place in Sal Port where cameras and inmate witnesses were able to see. I was escorted out of the Pod, told to place my hands against the wall, they pat me down & Sgt. Franco placed cuffs on me. Then I turned around towards A.W. Mcquade and he sprayed me in face with a Big Can of Mace. Then I was taken to the "Shu" for 30 Days. Mr. Hunter, who is a officer will concur that A.W. Mcquade didn't handle the situation correctly and or by Policy. La Salle Corporation also reprimanded A.W. Mcquade.

I DECLARE UNDER PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. I THEREFORE PLACE MYSELF UNDER: TITLE 28 U.S.C. §1746.

EXECUTED ON July 6, 2021

SIGNATURE

IN THE UNITED STATES OF AMERICA

IN THE STATE OF ARIZONAIN THE COUNTY OF MARICOPADECLARATION/AFFIDAVIT
Of Negative Averment
UNDER THE PENALTY OF PERJURY

I, Jonathan Webb, BEING THE NARRATOR OF THE FACTS
PRESENTED IN THIS STATEMENT, ARE TRUE TO THE BEST OF MY KNOWLEDGE, OF THE EVENT(S)
THAT I WITNESSED AT SAID TIME. BEING AVAILABLE TO TESTIFY IF CALLED TO DO SO, OF
THE FACTS THEREIN. I HEREBY DECLARE:

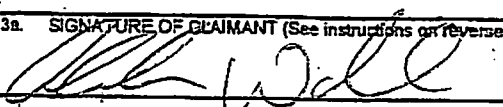
1. I am over the age of eighteen.
2. I am a United States Citizen.
3. At this time I know now that this could have been handled differently
without Excessive Force when I was already detained. They are trained
officers and I was already in cuffs therefore I should have never been
assaulted in the face by spraying of Mace especially because I was already
detained.

I DECLARE UNDER PERJURY THAT THE FOREGOING IS TRUE AND CORRECT. I THEREFORE PLACE
MYSELF UNDER: TITLE 28 U.S.C. §1746.

EXECUTED ON July 6, 2021

SIGNATURE

Ready to Mail out Oct. 1, 2021
w/ Attached Negative Affidavit

CLAIM FOR DAMAGE, INJURY, OR DEATH		INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of this form. Use additional sheet(s) if necessary. See reverse side for additional instructions.		FORM APPROVED OMB NO. 1105-0008	
1. Submit to Appropriate Federal Agency: U.S. Bureau of Prisons - Central Office 320 First Street, NW Washington, DC 20534 Attn: Federal Tort Claim Division			2. Name, address of claimant, and claimant's personal representative if any. (See instructions on reverse). Number, Street, City, State and Zip code. Jonathan Webb-Reg. #40177-408 F.C. Phoenix - Federal Correctional Institution: 37910 N. 45th Ave. Phoenix, AZ 85086		
3. TYPE OF EMPLOYMENT <input type="checkbox"/> MILITARY <input checked="" type="checkbox"/> CIVILIAN	4. DATE OF BIRTH 4/29/1985	5. MARITAL STATUS Single	6. DATE AND DAY OF ACCIDENT Oct. 10&11, 2019.	7. TIME (A.M. OR P.M.) 3 A.M.	
8. BASIS OF CLAIM (State in detail the known facts and circumstances attending the damage, injury, or death, identifying persons and property involved; the place of occurrence and the cause thereof. Use additional pages if necessary). Excessive Force Claim - See Attached Affidavit					
9. PROPERTY DAMAGE NAME AND ADDRESS OF OWNER, IF OTHER THAN CLAIMANT (Number, Street, City, State, and Zip Code). BRIEFLY DESCRIBE THE PROPERTY, NATURE AND EXTENT OF THE DAMAGE AND THE LOCATION OF WHERE THE PROPERTY MAY BE INSPECTED. (See instructions on reverse side). Personal Injury - Excessive Force- Jonathan Webb - SEE Attached Affidavit.					
10. PERSONAL INJURY/WRONGFUL DEATH STATE THE NATURE AND EXTENT OF EACH INJURY OR CAUSE OF DEATH, WHICH FORMS THE BASIS OF THE CLAIM. IF OTHER THAN CLAIMANT, STATE THE NAME OF THE INJURED PERSON OR DECEDENT. SEE AFFIDAVIT HERETO - Excessive Force					
11. WITNESSES					
NAME		ADDRESS (Number, Street, City, State, and Zip Code)			
SEE ATTACHED AFFIDAVIT		West Texas Detention Facility - La Salle Corrections 401 South Vaquero Ave. Seirra Blanca, TX 79851			
12. (See instructions on reverse). AMOUNT OF CLAIM (in dollars)					
12a. PROPERTY DAMAGE n/a	12b. PERSONAL INJURY \$3,600,000.00	12c. WRONGFUL DEATH n/a	12d. TOTAL (Failure to specify may cause forfeiture of your rights). \$3,600,000.00		
I CERTIFY THAT THE AMOUNT OF CLAIM COVERS ONLY DAMAGES AND INJURIES CAUSED BY THE INCIDENT ABOVE AND AGREE TO ACCEPT SAID AMOUNT IN FULL SATISFACTION AND FINAL SETTLEMENT OF THIS CLAIM.					
13a. SIGNATURE OF CLAIMANT (See instructions on reverse side). 		13b. PHONE NUMBER OF PERSON SIGNING FORM n/a	14. DATE OF SIGNATURE 10/1/2021		
CIVIL PENALTY FOR PRESENTING FRAUDULENT CLAIM The claimant is liable to the United States Government for a civil penalty of not less than \$5,000 and not more than \$10,000, plus 3 times the amount of damages sustained by the Government. (See 31 U.S.C. 3729).		CRIMINAL PENALTY FOR PRESENTING FRAUDULENT CLAIM OR MAKING FALSE STATEMENTS Fine, imprisonment, or both. (See 18 U.S.C. 287, 1001.)			

INSURANCE COVERAGE

In order that subrogation claims may be adjudicated, it is essential that the claimant provide the following information regarding the insurance coverage of the vehicle or property.

15. Do you carry accident insurance? ☐ Yes If yes, give name and address of insurance company (Number, Street, City, State, and Zip Code) and policy number. ☒ No

16. Have you filed a claim with your insurance carrier in this instance, and if so, is it full coverage or deductible? ☐ Yes ☒ No 17. If deductible, state amount

18. If a claim has been filed with your carrier, what action has your insurer taken or proposed to take with reference to your claim? (It is necessary that you ascertain these facts).

19. Do you carry public liability and property damage insurance? ☐ Yes If yes, give name and address of insurance carrier (Number, Street, City, State, and Zip Code). ☒ No

INSTRUCTIONS

Claims presented under the Federal Tort Claims Act should be submitted directly to the "appropriate Federal agency" whose employee(s) was involved in the incident. If the incident involves more than one claimant, each claimant should submit a separate claim form.

Complete all items - Insert the word NONE where applicable.

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE, AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY

Failure to completely execute this form or to supply the requested material within two years from the date the claim accrued may render your claim invalid. A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

If instruction is needed in completing this form, the agency listed in Item #1 on the reverse side may be contacted. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplementing regulations. If more than one agency is involved, please state each agency.

The claim may be filed by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with the claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, parent, guardian or other representative.

If claimant intends to file for both personal injury and property damage, the amount for each must be shown in item number 12 of this form.

DAMAGES IN A SUM CERTAIN FOR INJURY TO OR LOSS OF PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.

The amount claimed should be substantiated by competent evidence as follows:

(a) In support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of the injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.

(b) In support of claims for damage to property, which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested persons, or, if payment has been made, the itemized signed receipts evidencing payment.

(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.

(d) Failure to specify a sum certain will render your claim invalid and may result in forfeiture of your rights.

PRIVACY ACT NOTICE

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and concerns the information requested in the letter to which this Notice is attached.

A. **Authority:** The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 28 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R. Part 14.

B. **Principal Purpose:** The information requested is to be used in evaluating claims.

C. **Routine Use:** See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.

D. **Effect of Failure to Respond:** Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid."

PAPERWORK REDUCTION ACT NOTICE

This notice is solely for the purpose of the Paperwork Reduction Act, 44 U.S.C. 3501. Public reporting burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Director, Tax Form Branch, Attention: Paperwork Reduction Staff, Civil Division, U.S. Department of Justice, Washington, DC 20530 or to the Office of Management and Budget. Do not mail completed form(s) to these addresses.

July 07, 2021 I sent out through legal Mail here at FCI Phoenix-Medison, Risk Management Formal Complaint w/ example of Tort Claim pending there response in 60 days (expected time for response - 60 days)¹, Sent to La Salle Correctional Corp., Headquarters, 192 Bastille Lane, Suite 200, Ruston, LA. 71270 Telephone # 318) 232-1500 Fax # 318) 232-1501², Sent to West Texas Detention Facility La Salle Corrections, 401 South Vaquero Ave, Sierra Blanca, Texas. 79851, ³ Sent to Risk Management Department in Austin Texas, 300 W. 15th Street, Austin, Texas. 78701, ⁴ Sent to Office of the Governor, P.O. box 12428, Austin, TX. 78711-2428

July 07, 2021 I sent out through legal Mail here at FCI Phoenix-Medison ^{request for my} A complete copy of my central file through F.O.I.A. sent to La Salle corrections Corp. Headquarters requesting All Grievances I filed all Notarized Affidavits / Complaints, Transcripts, emails, documents, notes, investigations on Excessive Force she reviews & Reprimands on A. Warden McGuade and on any other officers as well as any other documents in references to me and my incarceration at West Texas Detention Facility La Salle Corrections located at 401 South Vaquero Ave, Sierra Blanca, TX. 79851.
² Sent to west tx detention facility Lasalle corrections ^{FOIA Dep.}
³ Sent to Federal Bureau of prisons - central office 320 15 street N.W., Washington, DC. 20534. With I.D.

July. 19, 2021 I sent through legal Mail here at FCI phoenix-Medium
I request through F.O.I.A the letters I sent to
Hudspeth County Sheriff department regarding me
& my Complaint on A. Warden McGuade from Nov
2019 to JAN. 2020

July. 16, 2021 I sent through legal Mail here at FCI phoenix-Medium
sent Civil Right Formal complaint to D.O.J. civil Right
Division, 601 D St. N.W., Washington DC. 20579
(with two claims excessive force & Retaliation/Racial
Comments/Slenderment)

July. 28, 2021 I sent out through legal mail here at FCI phoenix-
Medium. sent to on excessive force & Retaliation
Racial Comments/Slenderment, N.AACP, National head-
quarters 4805 Mt. Hope Drive, Baltimore, M.D. 21212
also sent to ACLU 125 Broad Street, 18 Floor,
New York, Ny. 10004

June. 06, 2021 I reached out to Medical/Staff, Health services by
email to NO Avail on help speaking to Anyone

Attachment 2 of 1 pages.

TRULINCS 40177480 - WEBB, JONATHAN KEITH - Unit: PHX-Y-A

FROM: 40177480

TO: Health Services

SUBJECT: ***Request to Staff*** WEBB, JONATHAN, Reg# 40177480, PHX-Y-A

DATE: 06/06/2021 07:12:08 AM

To: MEDICAL DEPARTMENT

Inmate Work Assignment: N/A

MEDICAL DEPARTMENT, (6/6/2021 - SUN.)

I am sending this request to staff to Health Services in order to set-up a appointment because I need some type of medication for the excessive force that happened to me in Texas. I am waiting to ask for help. I have been trying to handle this myself but the nightmares keep happening and daily now. Just being next to C.O's also make me nervous. I would like to be seen as soon as possible. I would like to be seen for Trauma. Thanks for your time in advance, Sincerely, Jonathan Keith Webb.

-----Psychology on 6/4/2021 12:12 PM wrote:

>

Psychology does not have a role in prescribing medication. I have forwarded this request to the Health Services Department. You also can go to Medical for sick call on Monday morning to be seen. Psychology will follow up with you within the next 2 weeks. Also as a reminder, if you are having a psychology emergency you can tell any staff member for immediate assistance.

Moore

Psychology Technician

>>> ~^!"WEBB, ~^!JONATHAN KEITH" <40177480@inmatemessage.com> 6/4/2021 9:48 AM >>>

To: PSYCHOLOGY DEPARTMENT

Inmate Work Assignment: n/a

TO WHOM IT MAY CONCERN, (JUNE 4, 2021 - FRI.)

I THOUGHT I CAN GET OVER THIS PROBLEM I HAD IN SIERRA BLANCA TEXAS AT THE WEST TEXAS DETENTION FACILITY WHEN I WASN'T AGGRESSIVE AT ALL I COMPLIED WITH ORDERS PLACED IN CUFFS THEN ASSAULTED IN MY FACE BY MACE THEN CALLED RACIAL SLURS THEN PUT IN THE SHU LIKE A PIECE OF TRASH I HAVE NIGHT MARES AND I'M MENTALLY DISTRAUGHT BEHIND THIS AND I'M REQUESTING TO BE PUT ON SOME TYPE OF MEDICATION TO HELP ME COPE WITH THIS TRAUMA THAT TOOK PLACE AT WEST TEXAS DENTENTION FACILITY